AUG 1 2 2004

510(k) Summary of Safety and Effectiveness

Submitter:

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Date Prepared:

July 15, 2004

Trade Name:

E-Tac EX-1000 Electrocardiographic Event Recorder

Common Name:

Ambulatory ECG Event Recorder

Classification Name: Telephone electrocardiographic transmitter and receiver

(class 2 device; 21 CFR 870.2920; product code: DXH)

Predicate Devices

• Instromedix King of Hearts Express 3x [K920984]

• Braemar ER300 series (ER300, ER310, ER320) [K923930]

• Braemar ER700 series (ER710 and ER720) [K981394]

Indications for Use

The Datrix E-Tac EX-1000 Electrocardiographic Event Recorder device is intended for long-term monitoring of ambulatory cardiac patients who experience intermittent symptoms associated with cardiac arrhythmia. Upon activation by the patient, ECG data are stored for future transmission via telephone to a receiving station. Data transmission is initiated by the patient and confirmed by the receiving station. Once data are transmitted, they are immediately available for review solely by a physician or other qualified medical professionals.

Description

The Datrix E-Tac EX-1000 (here simply: EX-1000) Electrocardiographic [ECG] Event Recorder is intended for long-term monitoring of ambulatory cardiac patients who experience intermittent symptoms associated with cardiac arrhythmia. Lightweight and compact, the EX-1000 is designed to be as non-intrusive as possible to the patient, and can operate up for 30 days on two AAA alkaline batteries. The patient's ECG data are acquired via patient leadwires (two-lead, one-channel). At the onset of an event, the patient presses the [Record] button to store his or her ECG data in the recorder's flash memory. Events are recorded according to one of four user-selectable memory configurations. Up to two events may be recorded before transmission of the data to a compatible receiving station is required. The patient initiates data transmission via telephone by removing the patient leadwires and pressing the [Send] button, upon which the stored data are transmitted. A physician or other qualified medical professional reviews the transmitted data. Feedback on the EX-1000 recorder status is provided to the user (technician and/or patient) via a multi-colored LED and audible tones.

Standards/Guidance Documents

- AAMI/ANSI EC38:1998 Ambulatory Electrocardiographs
- IEC 60601-1, Medical Electrical Equipment Part 1: General Requirements for Safety, 1988; Amendment 1, 1991-11, Amendment 2, 1995-03
- AAMI / ANSI / IEC 60601-1-2:2001, Medical Electrical Equipment Part 1-2: General Requirements for Safety Collateral Standard: Electromagnetic Compatibility Requirements and Tests
- ISO 14971, "Medical devices Application of risk management to medical devices" (December 15, 2000)
- Partially Applicable: Cardiac Monitor Guidance (including Cardiotachometer and Rate Alarm); Final, Version 1.0, November 5, 1998.
- Guidance for the Content of Premarket Submissions for Software Contained in Medical Devices; Final, May 29, 1998.
- Medical Device Use-Safety: Incorporating Human Factors Engineering into Risk Management, July 18, 2000.

Operational Principle(s)

The operational principles for the EX-1000 are as follows: ECG data are acquired via patient leadwires, sampled with an analog/digital converter, and subsequently saved to the flash memory. Stored ECG data are transmitted to a compatible receiving station utilizing FM Modulation and Frequency Shift Keying techniques. Transmission characteristics include carrier center frequency, carrier deviation, and transmission speeds commensurate with the predicate devices, which ensure compatibility with many commercially available receiving stations.

System Descriptions

- 1. Modes of Operation:
 - Monitoring mode— ECG data continuously acquired and written to flash memory in a loop. The size of the looping memory varies according to one of four selectable memory configurations.
 - Recording mode when the patient presses the [Record] button, data are stored in flash memory until transmitted.
 - Transmission mode data are transmitted via telephone to a compatible receiving station
- 2. Software Software pertaining to the EX-1000 consists of the firmware instructions to the microcontroller for managing the different functions of the recorder. The firmware is considered to be of "minor level" of concern as evaluated using the FDA's "Guidance for the Content of Premarket Submissions for Software Contained in Medical Devices, Final" (May 29, 1998). Software

Documentation was provided in the submission commensurate with this evaluation. The firmware was designed, documented, and validated in accordance with required device Design Controls [i.e., 21 CFR 820.30]. Risks associated with the firmware were analyzed in accordance with FDA's Guidance "Medical Device Use-Safety: Incorporating Human Factors Engineering into Risk Management" (July 18, 2000), and ISO 14971, "Medical devices — Application of risk management to medical devices" (December 15, 2000).

Performance Testing

In addition to thorough verification and validation testing, the Datrix E-Tac EX-1000 has been tested and conforms to the following recognized performance standard for safety and effectiveness:

• AAMI/ANSI EC38:1998 Ambulatory Electrocardiographs

By the time of marketing, the Datrix E-Tac EX-1000 has and will have been further tested to conform to the following recognized safety standards:

- IEC 60601-1, Medical Electrical Equipment Part 1: General Requirements for Safety, 1988; Amendment 1, 1991-11, Amendment 2, 1995-03
- AAMI / ANSI / IEC 60601-1-2:2001, Medical Electrical Equipment Part 1-2: General Requirements for Safety Collateral Standard: Electromagnetic Compatibility Requirements and Tests
- ISO 14971, "Medical devices Application of risk management to medical devices" (December 15, 2000)

Predicate Device Performance Comparisons

Compliance to the ISO 14971 risk assessment requirements was accomplished by demonstrating in-house conformance to safety and reliability standards for acquiring, recording and transmission of known input signals. In addition to testing to AAMI/ANSI EC38:1998, verification, and validation, a predicate comparison test was conducted between the EX-1000 and the listed predicate devices. Performance of each device was evaluated over a range of input amplitudes and frequencies. A total of 24 in-house simulated events were recorded, and subsequently transmitted twice (2 x 24), once each to two separate, commercially available receiving stations (GEMSTM Lite and EKG SpeaksTM). Reports were printed out from each receiving station, and multiple measurements of each transmitted event were made of 2 key data characteristics: amplitude and timing (frequency). Results are summarized as follows:

- All recorders (EX-1000 and predicates) accurately reproduced the timing/frequency of the known input signals with no variance within or between devices.
- For amplitude measurements, all devices performed to requirements and tolerances specified in the AAMI/ANSI EC38:1998 standard.

• Twelve of the 24 combinations of amplitude, frequency, and receiving station combinations tested were input signals for frequencies at 25Hz; the remaining twelve were at 40Hz. All devices showed amplitude attenuation commensurate with their bandwidth specifications.

Two in-house, three-factor ANOVA evaluations were performed separately on amplitude data from each of the receiving stations. Results and statistical analyses indicated that performance of the Datrix EX-1000 was substantially equivalent or better than the three predicate devices with regards to amplitude reproduction in nearly all combinations of input amplitudes, input frequencies, and receiving stations (total of 24 cases). The following Performance Table summarizes these statistical results:

Device	Amplitude reproduction not significantly different or better than all other devices	Amplitude reproduction not significantly different or better than at least one device	Amplitude reproduction significantly different than other devices	Statistic	
EX-1000	20 of 24 cases	3 of 24 cases	1 of 24 cases†	p < 0.001	
ER320	11 of 24 cases	13 of 24 cases	0 of 24 cases	p <0.001	
ER720	9 of 24 cases	8 of 24 cases	7 of 24 cases*	p <0.001	
King of Hearts Express	6 of 24 cases	15 of 24 cases	3 of 24 cases	p <0.001	

[†] This case occurred for an input signal of 2.0mV and 0.5 Hz with measurements taken from printouts generated by the EKG SpeaksTM receiving station software. For the same signal when evaluated using the GEMSTM Lite receiving station, the EX-1000 was substantially equivalent to the King of Hearts Express recorder. See the note (+) below for further explanation.

The Comparison Tables on the following pages provide comparisons of the features and specifications of the EX-1000 device and each of the predicate devices.

Conclusion

The Datrix E-Tac EX-1000 is substantially equivalent to other predicate ambulatory ECG event recorders currently in commercial distribution.

^{* 5} of these cases were in the high frequency range, and significantly different results may be affected by bandwidth specifications.

⁺ all 3 cases were for the low frequency (0.5Hz) measurements taken using the EKG SpeaksTM receiving station software. The same effect was not seen with the GEMSTM Lite receiving station. Filtering algorithms used by the EKG SpeaksTM program may have affected these results.

Specification	Datrix E-Tac	Instromedix	Braemar	Braemar
7	EX-1000	King of Hearts	ER 300 series	ER 700 series
Intended Use	The Datrix E-Tac EX-1000 Electrocardiographic Event	(From the manual)	(From the manual)	To record infrequent and elusive ECG heart
	Recorder device is intended	The King of Hearts	The ER300 Series Event	arrhythmia data. Once an
	for long-term monitoring of	Express® 3X TM cardiac	Recorders are battery operated,	event is recorded, patients
	ambulatory cardiac patients	event recorder is a patient-	solid state patient activated event	transmit the recorded ECG
	symptoms associated with	activated device designed for diagnostic evaluation of	recorders designed to recorder infrequent and elusive heart	data over the telephone. Or, as an alternative, the ER 700
	cardiac arrhythmia. Upon	transient symptoms such as	arrhythmias. The recorders offer	Series allows the ECG data
	acuvanon by the patient,	dizziness, palpitations and	ten preprogrammed recording	to be transferred directly to
	future transmission via	chest pain. The King of Hearts Express® 3XTM has	opuons and win operate for a minimum of 7 days with a 9V	a nost FC II the patient returns the unit to the clinic.
	telephone to a receiving	five minutes of looping	alkaline battery.	
	is initiated by the patient	ECG data both before and		
	receiving station. Once data	after the patient experiences a cardiac symptom. The		
	are transmitted, they are immediately available for	frequency response is .05 to 30Hz		
	review solety by a physician or other qualified medical professionals			
Standards	AAMI/ANSI EC38	unknown	unknown	AAMI/ANSI EC38
Sofatt	IEC60601-1 +A1 +A2	unknown	unknown	IEC60601-1 +A1 +A2
Carety				
EMC	IEC60601-1-2	unknown	unknown	IEC60601-1-2

Braemar ER 700 series	.05 – 30 Hz	2M ohm	±2mV	9P 09	ER710 – 1, ER720 - 2	8 bit	120/sec.	Yes	Flash	1 channel: 955 sec. 2 channels: 477 sec.	120
Braemar ER 300 series	ER300: .5 –35 Hz ER310/320: .05– 30 Hz	5M ohm	±2 mV	Not available	1 or 2	8 bit	120/sec.	ER300: No (post) ER310/320: Yes	RAM	ER300: 270 sec., ER310: 240 pre/135 post ER 320: 240 pre/100 post	2
Instromedix King of Hearts	.05 – 35 Hz –3db	2M ohm	2 mV	90 dp	-	15.6 μV	218 Hz	Yes	Microprocessor based	300 sec.	09
Datrix E-Tac EX-1000	.05 – 35 Hz –3db	>5M ohm	±2.5 mV	>60 db	Ħ	8 bit	128 samples/sec	Yes	Flash	360 sec.	2
Specification	Operational Principles <u>Acquire Data</u> : Bandwidth	Input Impedance	Signal Input Range	Common Mode Rejection	ECG Channels	Digitize Data: Resolution	Sample Rate	Record Data Looping memory	Memory Type	Max. Recording Duration	Maximum # of Events

Specification	Datrix E-Tac EX-1000	Instromedix King of Hearts	Braemar ER 300 series	Braemar ER 700 series
Power Requirements Battery	2 - AAA alkaline	2 - AAA alkaline	9V alkaline	2 - AAA alkaline
Battery Life	30 days	7 days	ER300: 30days, ER310/320: 19 days	7 days
Physical Specs Dimension, inches	2.5 x 1.6 x 0.57	3.38 x 2.13 x 0.65	ER 300: 4.15 x 2.39 x 1.06 ER 310/320: 4.15 x 2.39 x 0.86	3.5 x 2.125 x .65
Weight (w/batteries)	1.5 oz.	3.5 oz.	ER 300: 5.6 oz. ER 310/320: 3 oz.	3.5 oz.
Color	Black	Black	Black	Black
Enclosure	ABS, IPX0	Not available	Molded Plastic (UL94V-0)	Molded Plastic (UL94V-0)
Environmental Operating Temp.	0-45° C	10-40°C	0-45° C	0-45° C
Storage Temp.	-20-65° C	-10 - +60°C	-20 - +65° C	-20-+65° C
Operating Humidity (non-condensing)	5–95%	10–95%	10–95%	10–95%
Non-operating Humidity	5–95%	Not available	5-95%	2-95%



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

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Datrix, Inc. c/o Alfredo J. Quattrone, Ph.D., D.A.B.T. California Department of Health Services Food and Drug Branch Medical Device Safety Section, MS 7602 1500 Capitol Avenue Sacramento, CA 95814

Re: K042022

Trade Name: Datrix E-Tac EX-1000 ECG Event Recorder

Regulation Number: 21 CFR 870.2920

Regulation Name: DXH Regulatory Class: II (two)

Product Code: Telephone Electrocardiograph Transmitter and Receiver

Dated: August 6, 2004 Received: August 9, 2004

Dear Dr. Quattrone:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Page 2 - Alfredo J. Quattrone, Ph.D., D.A.B.T.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050. This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4646. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97) you may obtain. Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Bram D. Zuckerman, M.D.

Director

Division of Cardiovascular Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

Statement of Indications for Use

K 042022

510(k) Number:

Device Name:	Datrix E-Tac EX-1000 Electrocardiographic Event Recorder
Indications for Use:	The Datrix E-Tac EX-1000 Electrocardiographic Event Recorder device is intended for long-term monitoring of ambulatory cardiac patients who experience intermittent symptoms associated with cardiac arrhythmia. Upon activation by the patient, ECG data are stored for future transmission via telephone to a receiving station. Data transmission is initiated by the patient and confirmed by the receiving station. Once data are transmitted, they are immediately available for review solely by a physician or other qualified medical professionals.
	TE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED
Concur	rence of CDRH, Office of Device Evaluation (ODE)
Prescriptive Use X	OR Over-The-counter Use
(Per 21 CFR 801.109)	
	(Division Sign-Off) Division of Cardiovascular Devices KD 42 022
	510(k) Number